

ISSUE SLIP STAPLE AREA (for additional cross reference)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|------------|--------------|---------------|
| FEE DETERMINATION | <i>Mr</i> | <i>CRJ</i> | <i>9/1/95</i> |
| O.L.P.E. CLASSIFIER | | <i>12</i> | <i>9/9</i> |
| FORMALITY REVIEW | <i>OmK</i> | <i>69169</i> | <i>9999</i> |

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 ○ _____ Allowed I _____ Interference
 - (Through summary) Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Best Available Copy

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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